

Dual Recovery Anonymous

**For Those Of Us Who Experience Both
Chemical Dependency
And An Emotional Or Psychiatric Illness**

Step Skills

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The Twelve Steps of DRA

DRA's Twelve Steps are a plan, or framework, for dual recovery. The plan, or framework, is divided or broken down into twelve parts. Each step helps a person focus on a particular aspect of a dual disorder and dual recovery.

Each person can use DRA's Twelve Steps To:

- Develop their direction for dual recovery
- Develop positive attitudes and actions to support and enhance dual recovery
- Organize and use their resources

DRA's Twelve Steps Help In Several Areas

Acceptance: Learn to accept the dual disorder of chemical dependency and emotional or psychiatric illness, and to accept the need to develop and practice a personal program for dual recovery that focuses on recovery from both illnesses.

Help: Choose a source of help and decide to use that Higher / Helping Power for dual recovery. That source of help may be referred to as a Higher Power or any other name that feels comfortable. Higher / Helping Power may include many components.

Identify Assets and Liabilities: Identify the personal assets (attitudes, actions, and experiences) that can strengthen and enhance dual recovery. Identify the personal liabilities (attitudes, actions, and experiences) that pose a risk for dual recovery.

Change: Work with a personal source of help (Higher Power) to strengthen the personal assets for dual recovery and remove the personal liabilities that pose a risk for dual recovery.

Mend Relationships: Identify people who have been negatively affected by a DRA member's dual disorder. Through dual recovery, work to mend those relationships.

Maintain Dual Recovery and Prevent Relapse: Continue to strengthen personal assets for dual recovery and remove personal liabilities that pose risk for relapse, by continuing to work with a personal source of help (Higher Power).

Help Others: share with others who experience dual disorders how dual recovery is possible.

Developing A Personal Twelve Step Program for Dual Recovery

The following are suggestions to help individuals who are new to DRA develop their own Twelve Step program for their personal dual recovery. It is important for each person to be able to begin from their own personal experiences, worldview and to use their own language and metaphors. It is equally important for them to be able to balance the challenges of dual recovery with their level of abilities and skills. Being able to picture the problem and solutions, developing and practice their personal Step plans and acknowledging progress can help new members maintain internal motivation and begin to experience "believable hope" for dual recovery.

Why the Step is Needed

- Identify how the Step relates to their chemical dependency.
- Identify how the Step relates to their emotional or psychiatric illness.
- Identify their specific problems and issues that the Step can help address.

How the Step Works

- Identify the actions that the Step suggests (i.e. made a decision, identify a Higher Power, made an inventory, etc.).
- Develop their understanding of how the Step can help them stop the harmful progression of their dual disorder.
- Develop their understanding of how the Step can help them begin and maintain their personal dual recovery.

Tools to Help

- Identify their resources that they can incorporate into their Step program (Steps, meetings, sponsorship, service providers, medications, etc.).
- Identify and plan strategies that they can incorporate into their Steps to help them develop positive coping of "Step skills". Barriers to Overcome.
- Identify attitudes, beliefs, expectations, feelings and relationships that are in conflict with their Steps that may make it difficult for them to make a commitment and take action for their dual recovery.
- An individual who has experienced multiple hospitalizations, or relapses and losses due to their dual disorder may believe that they do not have the abilities and skills for dual recovery. A person may feel discouraged if they experience ongoing difficulty stabilizing their symptoms of emotional or psychiatric illness.

Benefits

- Identify how the Step can help them decrease the problems and consequences that they have experienced as a result of their dual disorder.
- Identify how the Step can help them cope with the symptoms of their dual disorder, maintain recovery and prevent relapse.
- Identify how the Step can help them improve their ability to help the emotional wounds that they may have experienced as a result of their dual disorder.

Stepping Forward

- Identify how the Step they are currently working with leads into the next Step to maintain the process of dual recovery.

DRA's TWELVE STEPS

Dual Recovery Anonymous (DRA) Twelve Steps

DRA's founding members began developing a program for the Fellowship that is based on the Principles of the Traditional Twelve Steps, the personal experiences of men and women in dual recovery and the principle of personal freedom and choice. The founding members wanted to:

- Extend the Heritage of the Twelve Step Fellowships to include people who experienced dual disorders.
- Expand the Principles of the traditional Twelve Steps in order to focus on both chemical dependency and an emotional or psychiatric illness.
- Present the DRA Steps in a way that is more specific to the recovery needs of people who experienced dual disorders, while retaining the important language of the traditional Twelve Steps.

Affirmations:

- Step 3 "...to help us to rebuild our lives in a positive and caring way."
- Step 2 "...and to help us strengthen our assets for recovery."
- Step 10 "...while continuing to recognize our progress in dual recovery."

Key Words:

- Powerless
- Unmanageable
- Higher Power
- Sanity (v) Insanity
- Personal Inventory
- Assets and Liabilities

DRA Twelve Steps are presented with the changes in language underlined, *affirmations* that were added into the DRA Steps are noted in italics.

DUAL RECOVERY ANONYMOUS TWELVE STEPS

- 1. We admitted we were powerless over our dual illness of chemical dependency and emotional or psychiatric illness—that our lives had become unmanageable.**
- 2. Came to believe that a Higher Power of our understanding could restore us to sanity.**
- 3. Made a decision to turn our will and our lives over to the care of our Higher Power, *to help us to rebuild our lives in a positive and caring way.***
- 4. Made a searching and fearless personal inventory of ourselves.**
- 5. Admitted to our Higher Power, to ourselves, and to another human being, the exact nature of our liabilities and our assets.**
- 6. Were entirely ready to have our Higher Power remove all our liabilities.**
- 7. Humbly asked our Higher Power to remove these liabilities, *and to help us to strengthen our assets for recovery.***
- 8. Made a list of all persons we had harmed and became willing to make amends to them all.**
- 9. Made direct amends to such people wherever possible, except when to do so would injure them or others.**
- 10. Continued to take personal inventory and when wrong promptly admitted it, *while continuing to recognize our progress in dual recovery.***
- 11. Sought through prayer and meditation to improve our conscious contact with our Higher Power, praying only for knowledge of our Higher Power's will for us and the power to carry that out.**
- 12. Having had a spiritual awakening as a result of these Steps, we tried to carry this message to others who experience dual disorders and to practice these principles in all our affairs.**

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*Adapted from the Twelve Steps of Alcoholics Anonymous.

DUAL RECOVERY ANONYMOUS TWELVE STEPS

— Step 1 —

“We admitted we were powerless over our dual illness of chemical dependency and emotional or psychiatric illness – that our lives had become unmanageable.”

————— Powerless —————	
Chemical Dependency	Emotional or Psychiatric Illness
<ul style="list-style-type: none"> • The onset of symptoms has already happened. • Intoxication Changes: <ul style="list-style-type: none"> - Thinking - Mood and Emotions - Sensations and Perceptions - Behavior • Chemical dependency influences symptoms of emotional or psychiatric illness. • I may ignore or minimize the risks of chemical dependency. • The symptoms of chemical dependency may reoccur (return). • Relapse is a risk. 	<ul style="list-style-type: none"> • The onset of symptoms has already happened. • Emotional or psychiatric illness Changes: <ul style="list-style-type: none"> - Thinking - Mood and Emotions - Sensations and Perceptions - Behavior • Emotional or psychiatric illness influences symptoms of chemical dependency. • I may ignore or minimize the risks of emotional or psychiatric illness. • The symptoms of emotional or psychiatric illness may reoccur (return). • Relapse is a risk.

————— Unmanageable —————	
Chemical Dependency	Emotional or Psychiatric Illness
<p>I am <u>unable to manage</u> to have a positive quality of life, when I am drinking or using drugs.</p> <ul style="list-style-type: none"> ✧ Symptoms interfere ✧ Problems and consequences ✧ Self defeating behavior ✧ Self esteem is affected ✧ Crisis: Continue progression Recover or Change 	<p>I am <u>unable to manage</u> to have a positive quality of life, when I am not following a healthy and constructive plan to manage my emotional or psychiatric illness.</p> <ul style="list-style-type: none"> ✧ Symptoms interfere ✧ Problems and consequences ✧ Self defeating behavior ✧ Self esteem is affected ✧ Crisis: Continue progression Recover or Change

— Step 2 —

**“Came to believe that a Higher Power of our understanding
could restore us to sanity.”**

————— Came To Believe —————	
Chemical Dependency	Emotional or Psychiatric Illness
<p>“Came to believe...” May be a gradual process for some DRA members.</p> <p>Old idea in recovery: HOW = Honesty Open mindedness Willingness</p> <p>Be willing to work with new points of view and consider how they might help in dual recovery.</p>	

————— Higher Power —————	
Chemical Dependency	Emotional or Psychiatric Illness
Higher Power or “Helping Power”	Higher Power or “Helping Power”
<ul style="list-style-type: none"> • I am free to choose my personal Higher Power • My Higher power makes sense to me • I have my own understanding of how my Higher Power can help me • I understand <u>my role</u> in working with my Higher Power • A Higher Power may <u>not</u> be spiritual for some people - Spiritual issues may be an uncomfortable topic for several reasons: <ul style="list-style-type: none"> ✧ Negative experience while growing up related to prior experience in organized religion ✧ Involvement in a cult ✧ Heavy use of psychedelic drugs ✧ Psychiatric illness that produces: <ul style="list-style-type: none"> - Thought disorders: Religious ideation - Hallucinations: auditory, visual, or both • A DRA member may decide that following G.O.D. (Good Orderly Direction) is their Higher Power • A Higher Power may include professional help and medications • A DRA member may have several components working together to be their Higher Power • A DRA member is free to change their minds regarding their personal Higher Power 	

— Step 2 —

Chemical Dependency	Emotional or Psychiatric Illness
<p><u>Insanity</u> Unsound thinking and behavior</p> <p><u>Physical Level</u> Alcohol and street drugs cause changes in brain chemistry (Intoxication / Symptoms). Symptoms may interfere with:</p> <ul style="list-style-type: none"> • Ability to function effectively • Ability to relate to others effectively <p><u>Awareness</u> Example: A person is in recovery from chemical dependency</p> <ul style="list-style-type: none"> • They know their history: <ul style="list-style-type: none"> - Of symptoms (Intoxication) - Of problems / consequences • They know what to do to maintain recovery and manage symptoms <p><u>Attitude Level</u> “Stinkin’ Thinkin’”</p> <ul style="list-style-type: none"> • About chemical dependency and recovery • Stop following recovery plan for chemical dependency • Ignore or minimize warning signs of symptoms 	<p><u>Insanity</u> Unsound thinking and behavior</p> <p><u>Physical Level</u> Psychiatric illness may cause changes in brain chemistry (Emotional or Psychiatric Symptoms). Symptoms may interfere with:</p> <ul style="list-style-type: none"> • Ability to function effectively • Ability to relate to others effectively <p><u>Awareness</u> Example: A person is in recovery from emotional or psychiatric illness</p> <ul style="list-style-type: none"> • They know their history: <ul style="list-style-type: none"> - Of emotional or psychiatric symptoms - Of problems / consequences • They know what to do to maintain recovery and manage symptoms <p><u>Attitude Level</u> “Stinkin’ Thinkin’”</p> <ul style="list-style-type: none"> • About emotional or psychiatric symptoms and recovery • Stop following recovery plan for emotional or psychiatric symptoms • Ignore or minimize warning signs of symptoms
<p><u>Sanity</u> Sound thinking and behavior</p> <p>I develop and follow a healthy and constructive plan to achieve and maintain my recovery, to prevent relapse and to improve the quality of my life.</p>	<p><u>Sanity</u> Sound thinking and behavior</p> <p>I develop and follow a healthy and constructive plan to manage my psychiatric illness, to reduce the risk of my symptoms reoccurring, to minimize the severity of the symptoms and to improve the quality of my life.</p>

— Step 3 —

**“Made a decision to turn our will and our lives over to the
care of our Higher Power,
to help us to rebuild our lives in a positive and caring way..”**

Chemical Dependency	Emotional or Psychiatric Illness
Step 2: <u>I choose</u> my Higher power (Helping Power).	
Step 3: <u>I decide to use</u> my Higher Power (Helping Power).	
<ul style="list-style-type: none">• Turn my self defeating and self destructive attitudes and actions, to a positive direction, toward positive Goals• Accept and work with the help of the Higher Power that I have already freely chosen• To help me to rebuild my life• "...over to the care of our Higher Power..."• Care is not control, they same as control	

— Step 4 —

“Made a searching and fearless personal inventory of ourselves.”

Chemical Dependency	Emotional or Psychiatric Illness
<ul style="list-style-type: none">• <u>Assets</u>: My strengths, attitudes, beliefs, actions, relationships, and personal positive qualities that I can build on to help me in my recovery. (What helps?)• <u>Liabilities</u>: My strengths, attitudes, beliefs, actions, relationships, and experiences that will put my recovery at risk. (What hurts?)<ul style="list-style-type: none">✧ Increase the risk of relapse✧ Increase the risk of symptoms returning✧ Increase the risk of current symptoms becoming more severe• <u>Impact to Others</u>: How has my chemical dependency, or neglecting recovery affected, other people?	<ul style="list-style-type: none">• <u>Assets</u>: My strengths, attitudes, beliefs, actions, relationships, and personal positive qualities that I can build on to help me in my recovery. (What helps?)• <u>Liabilities</u>: My strengths, attitudes, beliefs, actions, relationships, and experiences that will put my recovery at risk. (What hurts?)<ul style="list-style-type: none">✧ Increase the risk of relapse✧ Increase the risk of symptoms returning✧ Increase the risk of current symptoms becoming more severe• <u>Impact to Others</u>: How has my emotional or psychiatric illness, or neglecting recovery, affected other people?

Dual Recovery Inventory

Liabilities (-)	Assets (+)
Thinking / Attitudes	Thinking / Attitudes
Experiences / Memories	Experiences / Memories
Feelings / Emotions	Feelings / Emotions
Sensations / Perceptions	Sensations / Perceptions
Actions	Actions
Relationships	Relationships
Health Needs	Health Needs
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